Effective October 1, 2003 10 19 58 57												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL E	NTITY	OR	OTHEF SMALL	THAN ENTITY
T	OTAL CLAIMS	·	2/					RATE	FEE	]	RATE	FEE
F	OR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	→ minus 20=		•			X\$ 9=		OR	X\$18=	18
INDEPENDENT CLAIMS			3 minus 3 =		• •		Ī	X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT					<i></i>		t	+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column						column 2	L	TOTAL		OR	TOTAL	788
CLAIMS AS AMENDED - PART II											OTHER	THAN
		(Column 1)				(Column 3)	·	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A	3/6/6	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.21	Minus	-2	<u> </u>	=	ı	X\$ 9=		OR	X\$18=	
	Independent	1. 3	Minus	**** (	<u>3</u> .	-	Γ	X43=		OR	X86=	$\mathcal{T}$
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL						Γ	+145=		OR	+290=	
							L.	TOTAL		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colum	ות 21	(Column 3)	AL	DIT. FEE		,	WDII. PEEI	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	•• .	-	= '	L	X\$ 9=		OR	X\$18=	
	Independent	NTATION OF MI	Minus	ENDENT	CI AIM			X43=	•	OR	X86=:	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								•	OR	+290=	•
								TOTAL DIT. FEE		OR ,	TOTAL LODIT, FEE	
	(Column 1) (Column 2) (Column 3								· .	•	•	•
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		-		<b>(\$ 9=</b>		OR	X\$18=	
	Independent		Minus ***			=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									$^{\circ}$		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	<u> </u>
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE											TOTAL DOIT, FEE	
		ber Previously Paid					found	in the appr	opriate box	in colu	mn 1.	

Application or Docket Number